## Case 24-13445-amc Doc 34 Filed 03/10/25 Entered 03/10/25 11:51:59 Desc Main Document Page 1 of 2

Fill	in this information t	to identify your ca	ase:							
Del	btor 1	Charles H P	rem			_				
	btor 2 buse, if filing)					-				
Uni	ited States Bankrup	otcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA		_				
Case number (If known) 2:24-bk-13445						⊠ Ar	Check if this is:  An amended filing A supplement showing postpetition chapter 13 income as of the following date:			
	fficial Form						M / DD/ Y			
S	chedule I: `	Your Inco	ome						12/15	
sup spo atta Par	plying correct info use. If you are sep ch a separate she tt 1: Describ	ormation. If you parated and you et to this form.	sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi	ng jointly, and your spith you, do not include	pouse is e informa	living with ation about	you, inclu your spo	ude information about youse. If more space is n	our eeded,	
1.	Fill in your empl information.	oyment		Debtor 1			Debtor 2 or non-filing spouse			
	If you have more attach a separate information about	about additional time, seasonal, or	Employment status	<ul><li>☑ Employed</li><li>☑ Not employed</li></ul>			⊠ Employed ☐ Not employed			
			Occupation	Truck Driver			Ebay Seller			
	self-employed wo		Employer's name	Castles Enterpris	<u> </u>	Crackers in My Briefcase				
	Occupation may i or homemaker, if		Employer's address	214 Buck Road Newtown, PA 18940			1471 E Wilt Street Philadelphia, PA 19125			
			How long employed the	here?						
Par	rt 2: Give De	tails About Mor	thly Income							
unle	ess you are separate	ed.	te you file this form. If you	3 1	,	, ,	·	,	0 1	
	e space, attach a se									
						For Deb	tor 1	For Debtor 2 or non-filing spouse		
2.			ry, and commissions (becalculate what the month)		2.	\$4,	707.00	\$		
3.	Estimate and lis	t monthly overt	ime pay.		3.	+\$	0.00	+\$0.00		
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$4,70	7.00	\$		

Official Form 106I Schedule I: Your Income page 1

Debto	r 1	Charles H Prem		Case r	number (if known)	2:24-k	ok-13445		
				For Debtor 1		For Debtor 2 or non-filing spouse			
	Cop	by line 4 here	4.	\$	4,707.00	\$	0.00		
	·			·	<u>,                                      </u>				
		all payroll deductions:	<b>.</b>	Φ.	002 50	Φ.	0.00		
	5a. 5b.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a. 5b.	\$ \$	993.50 0.00	\$	0.00		
	эь. 5с.	Voluntary contributions for retirement plans	5c.	Φ <u>—</u> \$	0.00	Ψ	0.00		
	5d.	Required repayments of retirement fund loans	5d.	\$ \$	0.00	Ψ	0.00		
	5e.	Insurance	5e.	\$	224.42	\$	0.00		
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00		
	5g.	Union dues	5g.	\$	0.00	\$	0.00		
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	<b>-</b> 6.	\$	1,217.92	\$	0.00		
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,489.08	\$	0.00		
	<b>List</b> 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	739.55		
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00		
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00		
	8e.	Social Security	8e.	\$	0.00	\$	0.00		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	0.00		
	8g.	Pension or retirement income	– 8g.	\$ \$	0.00	\$	0.00		
	8h.	Other monthly income. Specify:	8h.+	· —	0.00	+ \$	0.00		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	739.55		
		culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	<b>3,489.08</b> + \$_	73	39.55 = \$ <u>4</u> ,	228.63	
	I. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00								
		If the amount in the last column of line 10 to the amount in line 11. The resulte that amount on the Summary of Schedules and Statistical Summary of Certain lies						228.63	
13.	Do y ⊠ □	you expect an increase or decrease within the year after you file this form?  No.  Yes. Explain:	?				Combined monthly in		